

## THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES



RACHEL KAPRIELIAN REGISTRAR 165 Liberty St Springfield, MA 01103 www.mass.gov/rmv

I,	, a certified Motorcycle
Safety Foundation RiderC	oach, RiderCoach #,
hereby request an exempti	on / waiver for the TEACHING REQUIREMENT
that is noted in the 2006 M	REP Policy Guide, Section II, paragraph 2.1.0 MREP
APPROVAL.	
The reason that I COULD	NOT / DID NOT meet the TEACHING REQUIREMENT
for thes	eason was
I am scheduled to supervise	e teach with RiderCoach
on per th	e scheduling by my Site Coordinator.
RiderCoach Signature and Date	Site Coordinator Signature and Date
Niuerooach Signature and Date	Sile Coordinator Signature and Date
——————————————————————————————————————	P Signature (If Approved) and Date
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